



PURCHASE ORDER

PO Number: 303-1-0512

Requisition Number: 303-1-01142

Order Date: 3/1/2021

Released

**DUE TO COVID-19 AND TFC'S COMMITMENT TO TIMELY PAYMENT,
PLEASE SUBMIT INVOICE ELECTRONICALLY TO:**
accountspayable@tfc.state.tx.us

IF INVOICE IS MAILED, DELAYS MAY OCCUR.

TEXAS FACILITIES COMMISSION
FISCAL MANAGEMENT / ACCOUNTS PAYABLE
P.O. BOX 13047 Austin, Texas 78711-3047

Delivery Location

--Select--

Show numbers on all papers and packages

Referenced Source or Vendor

13621024820
Arthur J. Gallagher Risk Management Services Inc
221 West 6th St.,
Suite 1980
Austin, TX 78701
Cheryl Kelley
Phone:5126522461, Fax:5126522462
cheryl_kelley@ajg.com

Cyber Liability Insurance

Description Reference attached quote

TFC Contact: Martha Gamez-Smith - 512-463-8695

Line Items

Description	Qty	Unit	Unit Price	Start Date	End Date	Total
Cyber Liability Insurance - \$3,000,000 aggregate coverage						
NIGP Class: 953 NIGP Item: 00 Object Class: 204 Reimbursement Type: Not Reimbursable	1	ea	\$12,809.00	12/18/2020	12/29/2020	\$12,809.00
Grand Total						\$12,809.00

Questions or concerns regarding this transaction or service should be directed to: Texas Facilities Commission Procurement Division, Phone: (512)463-0209 or FAX: (512)236-6164
(The mailing address for the Texas Facilities Commission is at the top of this purchase order.)

Agency

TFC

Fiscal Year

2021

Division	Finance
Program	Cybersecurity Svcs and Personnel
Phone	5124638695
Org Code	0608 - CB: Cybersecurity Svcs & Personnel
Type of Purchase/PCC Code	'Q' Purchases of services when the total amount is between \$5,000.01 - \$25,000.00
Work Order Number	n/a

ALL TERMS AND CONDITIONS SET FORTH IN OUR BID INVITATION BECOME A PART OF THIS ORDER. VENDOR GUARANTEES MERCHANDISE WILL MEET OR EXCEED SPECIFICATIONS IN THE BID INVITATION.

Invoicing Standards

To facilitate payments from Texas Facilities Commission please follow the invoicing standards set forth below.

The invoice should include, but is not limited to including:

- (1) the vendor's mailing and e-mail (if applicable) address;
- (2) the vendor's telephone number;
- (3) the name and telephone number of a person designated by the vendor to answer questions regarding the invoice;
- (4) the state agency requisition number;
- (5) the state agency's name, agency number, and delivery address;
- (6) the commission's purchase order number, if applicable;
- (7) the contract number or other reference number if applicable;
- (8) a valid Texas Identification Number (TIN) issued by the Comptroller of Public Accounts;
- (9) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (10) unit numbers corresponding to the original order; and
- (11) other relevant information supporting and explaining the payment requested or identifying a successor organization to an original vendor, if necessary.

FOB DESTINATION CASH DISCOUNT: 0% 0 DAYS.

TEXAS FACILITIES COMMISSION INTERNAL PURCHASING

PURCHASER: _____
 Sastry, Archana - CTCM, CTPM, 5124632743

(IN ACCORDANCE WITH YOUR BID, SUPPLIES MUST BE PLACED IN THE AGENCY RECEIVING ROOM IN DAYS FROM RECEIPT OF ORDER.)

STATE AND CITY SALES TAX EXEMPTION CERTIFICATE: The undersigned claims an exemption from taxes under Tex. Tax Code § 151.309 (1993), for purchase of tangible property described in this purchase order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas.

[\(Show Terms And Conditions...\)](#)